PROGRAM REGISTRATION FORM

OR Register online instead at www.activityreg.com, just click MA, then Needham Park and Recreation!

** REGISTRATION POLICIES CAN BE FOUND IN OUR BROCHURE ** PLEASE PRINT CLEARLY, IN BLUE OR BLACK INK! DATE: / / FAMILY NAME:____ ADDRESS: NUMBER AND STREET TOWN STATE/ZIP HOME PHONE: () CELL PHONE: () E-MAIL ADDRESS: (INCLUDING YOUR E-MAIL IS VERY HELPFUL IN CASE OF PROGRAM CANCELLATIONS OR CHANGES.) PHONE: () **EMERGENCY CONTACT:** DIFFERENT FROM THE PARENT OR MAIN CONTACT FULL NAME AND RELATION If your child is 5 years old or younger, is their birth certificate registered at the Park & Recreation Office? _______No, but will be within 3 days (Remember, registrations are not complete without a registered birth certificate!) PROGRAM CHOICES DOB: / / PARTICIPANT #1 NAME: ALLERGIES OR MEDICAL CONCERNS: PROGRAM NAME: ______SESSION/WEEK:______TIME/DAY:______LEVEL:_____FEE:_____ PROGRAM NAME: ______ FEE:_____ FEE:_____ FEE:____ _____DOB: / / PARTICIPANT #2 NAME: ALLERGIES OR MEDICAL CONCERNS: _____ PROGRAM NAME: SESSION/WEEK: TIME/DAY: LEVEL:_____ FEE:_____ SESSION/WEEK: _____TIME/DAY:_____LEVEL:_____FEE:____ PROGRAM NAME: PARTICIPANT #3 NAME: ______DOB:_____/_____ ALLERGIES OR MEDICAL CONCERNS: _____ PROGRAM NAME: SESSION/WEEK: TIME/DAY: LEVEL: FEE: ___SESSION/WEEK:______TIME/DAY:______LEVEL:______FEE:_____ PROGRAM NAME: (THIS AREA FOR MAILED REGISTRATIONS ONLY!) Payment must accompany completed, mailed-in registration form in order to be processed. Method of Payment: MAIL TO: Check - Make payable to TOWN OF NEEDHAM - Park & Recreation Registration Cash or Money Order Credit Card - (Please circle one) VISA MasterCard Discover Park & Recreation 500 Dedham Avenue Credit Card Number: Needham, MA 02492 CVC Code: (on back of card) Expiration Date: We do NOT accept

Cardholder's Signature:

fax registrations.